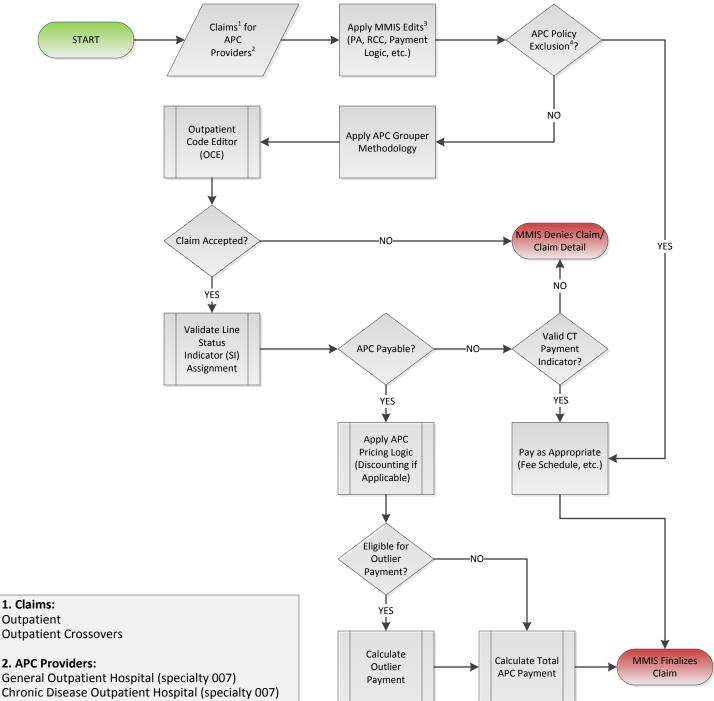
Connecticut APC Claim Payment Workflow



1. Claims:

Outpatient

2. APC Providers:

General Outpatient Hospital (specialty 007) Chronic Disease Outpatient Hospital (specialty 007) Psychiatric Outpatient Hospital (specialty 008)

3. MMIS Edits include:

Deny payment for Professional Services (RCC 960+) Assign CT Addendum B Payment Type

4. APC Policy Exclusions include:

Physical Therapy (RCC 42x) Occupational Therapy (RCC 43x) Speech Therapy (RCC 44x) CARES (RCC 769) Vaccine Administration (RCC 771) Behavioral Health Treatment/Services (RCC 90x, 91x) Tobacco Cessation – Group Counseling (RCC 953)

APC Payable:

APC Paid - Line item details are paid based on the APC assigned.

Packaged - Line item details may be zero paid. The payment for these services is often included in an APC payment on the claim for another detail.

Not APC Payable:

CT Paid - Line item details are paid based on Connecticut (CT) policy (e.g., other fee schedule payment).

CT Denied - Line item details are denied based on CT policy.